

Abbreviations

AN:	Acanthosis Nigricans
CHF:	Congestive Heart Failure
CVA:	Cerebrovascular Accident
CVD:	Cardiovascular Disease
FPG:	Fasting Plasma Glucose
GERD:	Gastro-esophageal Reflux Disease
HCP:	Health Care Professional
HDL-C:	High-density Lipoprotein Cholesterol
HTN:	Hypertension (>95th%ile Blood Pressure for Age & Gender & Ht)
LDL-C:	Low-density Lipoprotein Cholesterol
MAOI:	Monoamine Oxidase Inhibitors
NAFLD:	Non-alcoholic Fatty Liver Disease
PCOS:	Polycystic Ovary Syndrome
SGA:	Small for Gestational Age
SSRI:	Selective Serotonin Reuptake Inhibitors
T2DM:	Type 2 Diabetes Mellitus
TG:	Triglycerides

Criteria for Bariatric Surgery⁸

Adolescents being considered for bariatric surgery should:

- ◆ Have failed 6 months of organized attempts at wt management, as determined by their primary care provider
- ◆ Have attained or nearly attained physiologic maturity
- ◆ Be severely obese (BMI ≥ 40) with serious obesity-related comorbidities or BMI ≥ 50 with less severe comorbidities
- ◆ Demonstrate commitment to comprehensive medical and psychologic evaluations both before and after surgery
- ◆ Agree to avoid pregnancy for at least 1 yr postoperatively
- ◆ Be capable of and willing to adhere to nutritional guidelines postoperatively
- ◆ Provide informed consent to surgical treatment
- ◆ Demonstrate decisional capacity
- ◆ Have a supportive family environment

Footnotes:

1. Adapted from the Texas Council's *Weight Loss Algorithm for Overweight and Obese Adults*
2. Barlow SE, Dietz WH. Obesity evaluation and treatment: Expert Committee recommendations. The Maternal and Child Health Bureau, Health Resources and Services Administration and the Department of Health and Human Services. *Pediatrics*. 1998;102(3):E29
3. Barlow SE, Dietz WH. Obesity evaluation and treatment: Expert Committee recommendations. The Maternal and Child Health Bureau, Health Resources and Services Administration and the Department of Health and Human Services. *Pediatrics*. 1998;102(3):E29; and American Diabetes Association. Type 2 diabetes in children and adolescents. *Pediatrics*. 2000;105(3 Pt 1):671-80; Refer to appropriate Texas Diabetes Council algorithms
4. **Medications that affect insulin sensitivity:**

Inhaled steroids: <ul style="list-style-type: none"> ◆ 1000 mcg/day fluticasone (Flovent) ◆ 2000 mcg/day of all others Oral Steroids: <ul style="list-style-type: none"> ◆ 20 days in previous year, or any within 60 days of screening ◆ L-asparaginase ◆ FK506 (Tacrolimus) ◆ Cyclosporine (Neoral/Sandimmune) ◆ Niacin 	Medications known to cause wt gain: <ul style="list-style-type: none"> ◆ Lithium ◆ Risperidone (Risperdal) ◆ Olanzapine (Zyprexa) ◆ Clozapine (Clozaril) ◆ Quetiapine (Seroquel) ◆ Ziprasidone (Geodon) ◆ Carbamazepine (Tegretol) ◆ Valproic acid (Depakote/Depakene/Depacon) ◆ Tricyclic Antidepressants
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5. No evidence-based outcomes data are yet available for weight loss targets
6. Berkowitz RI, Wadden TA, Terhakovec AM, et al. Behavior therapy and sibutramine for the treatment of adolescent obesity: a randomized controlled trial. *JAMA*. 2003;289(14):1805-12; sibutramine is FDA-approved for ages ≥ 16 yr
7. McDuffie JR, Calis KA, Uwaifo GI, et al. Efficacy of orlistat as an adjunct to behavioral treatment in overweight African American and Caucasian adolescents with obesity-related co-morbid conditions. *J Pediatr Endocrinol Metab*. 2004;17(3):307-19; orlistat is FDA-approved for ages ≥ 12 yr
8. Inge TH, Krebs NF, Garcia VF, et al. Bariatric surgery for severely overweight adolescents: concerns and recommendations. *Pediatrics*. 2004;114(1):217-23
9. Rosner B, Prineas R, Loggie J, et al. Percentiles for body mass index in U.S. children 5 to 17 years of age. *J Pediatr*. 1998;132(2):211-22.

Additional References

- Bobo N, Evert A, Gallivan J, et al. An update on type 2 diabetes in youth from the National Diabetes Education Program. *Pediatrics*. 2004;114(1):259-63
- Garcia VF, Langford L, Inge TH. Application of laparoscopy for bariatric surgery in adolescents. *Curr Opin Pediatr*. 2003;15(3):248-55
- Krebs NF, Jacobson MS; American Academy of Pediatrics Committee on Nutrition. Prevention of pediatric overweight and obesity. *Pediatrics*. 2003;112(2):424-30

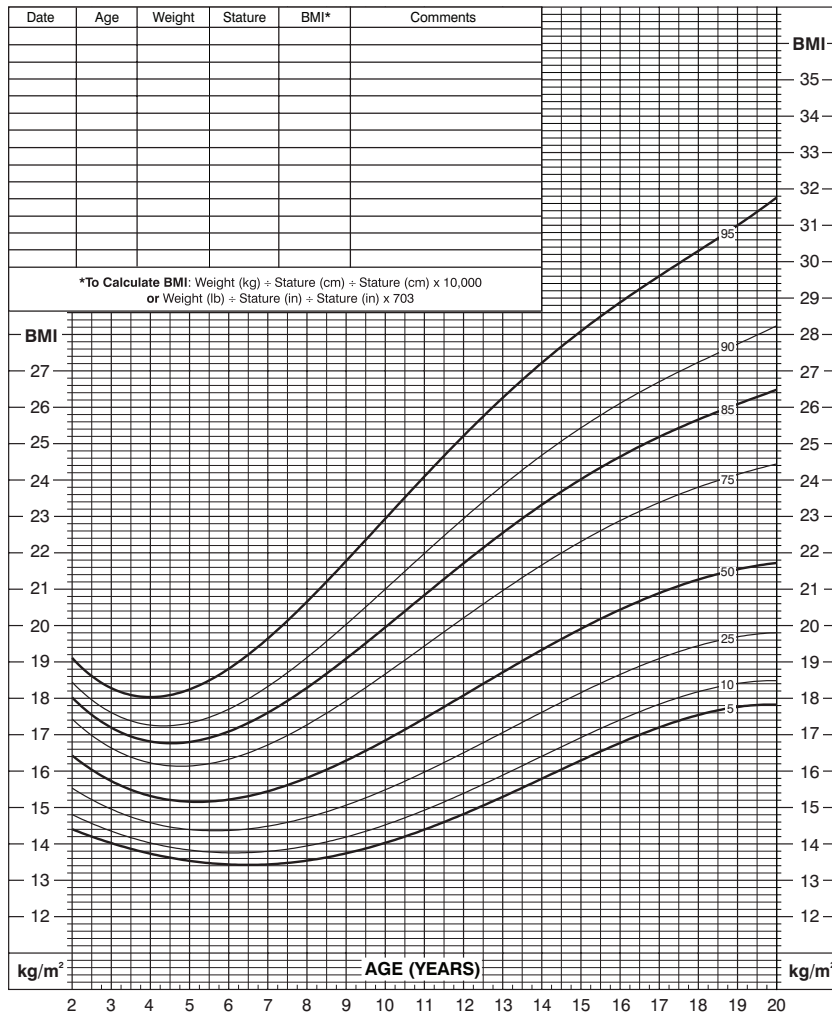
APPENDIX: Weight (lb) for different combinations of height (inch) and BMI (kg/m²)

Height (in)	Weight (lb)																													
36	24	26	28	29	31	33	35	37	39	40	42	44	46	48	50	52	53	55												
37	25	27	29	31	33	35	37	39	41	43	45	47	49	51	52	54	56	58												
38	27	29	31	33	35	37	39	41	43	45	47	49	51	53	55	57	59	61												
39	28	30	32	35	37	39	41	43	45	47	50	52	54	56	58	60	63	66												
40	30	32	34	36	39	41	43	45	48	50	52	55	57	59	61	64	66	68												
41	31	33	36	38	41	43	45	48	50	52	55	57	60	62	64	67	69	72												
42	33	35	38	40	43	45	48	50	53	55	58	60	63	65	68	70	73	75												
43	34	37	39	42	45	47	50	52	55	58	60	63	66	68	71	73	76	79												
44	36	38	41	44	47	49	52	55	58	60	63	66	69	71	74	77	80	82												
45	37	40	43	46	49	52	55	57	60	63	66	69	72	75	78	80	83	86												
46	39	42	45	48	51	54	57	60	63	66	69	72	75	78	81	84	87	90												
47	41	44	47	50	53	56	60	63	66	69	72	75	78	82	85	88	91	94												
48	43	46	49	52	56	59	62	65	69	72	75	78	82	85	88	92	95	98												
49	44	48	51	55	58	61	65	68	72	75	78	82	85	89	92	95	99	102												
50	46	50	53	57	60	64	67	71	75	78	82	85	89	92	96	99	103	106												
51	48	52	55	59	63	66	70	74	78	81	85	89	92	96	100	103	107	111												
52	50	54	58	61	65	69	73	77	81	84	88	92	96	100	104	107	111	115												
53	52	56	60	64	68	72	76	80	84	88	92	96	100	104	108	112	116	120												
54	54	58	62	66	70	74	79	83	87	91	95	99	103	108	112	116	120	124												
55	56	60	64	69	73	77	82	86	90	94	99	103	107	112	116	120	125	129												
56	58	62	67	71	76	80	85	89	93	98	102	107	111	116	120	125	129	134												
57	60	65	69	74	78	83	88	92	97	101	106	111	115	120	125	129	134	138												
58	62	67	72	76	81	86	91	96	100	105	110	115	119	124	129	134	138	143												
59	64	69	74	79	84	89	94	99	104	109	114	119	124	128	133	138	143	148												
60	66	72	77	82	87	92	97	102	107	112	118	123	128	133	138	143	148	153												
61	69	74	79	85	90	95	100	106	111	116	121	127	132	137	143	148	153	158												
62	71	76	82	87	93	98	104	109	115	120	125	131	136	142	147	153	158	164												
63	73	79	85	90	96	101	107	113	118	124	130	135	141	146	152	158	163	169												
64	76	81	87	93	99	105	110	116	122	128	134	140	145	151	157	163	169	174												
65	78	84	90	96	102	108	114	120	126	132	138	144	150	156	162	168	174	180												
66	80	87	93	99	105	111	117	124	130	136	142	148	155	161	167	173	179	185												
67	83	89	96	102	108	115	121	127	134	140	147	153	159	166	172	178	185	191												
68	85	92	98	105	112	118	125	131	138	144	151	158	164	171	177	184	190	197												
69	88	95	101	108	115	122	128	135	142	149	155	162	169	176	182	189	196	203												
70	90	97	104	111	118	125	132	139	146	153	160	167	174	181	188	195	202	209												
71	93	100	107	114	122	129	136	143	150	157	165	172	179	186	193	200	207	215												
72	96	103	110	118	125	132	140	147	155	162	169	177	184	191	199	206	213	221												
73	98	106	113	121	129	136	144	151	159	166	174	182	189	197	204	212	219	227												
74	101	109	117	124	132	140	148	155	163	171	179	187	194	202	210	218	225	233												
75	104	112	120	128	136	144	152	160	168	176	184	192	200	208	216	224	232	240												
76	107	115	125	131	139	148	156	164	172	180	189	197	205	213	221	230	238	246												
77	109	118	126	135	143	151	160	168	177	185	194	202	210	219	227	236	244	252												
78	112	121	130	138	147	155	164	173	181	190	199	207	216	225	233	242	250	259												
BMI (kg/m ²)	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30												

2 to 20 years: Girls
Body mass index-for-age percentiles

NAME _____

RECORD # _____



Published May 30, 2000 (modified 10/16/00).
SOURCE: Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000).
<http://www.cdc.gov/growthcharts>

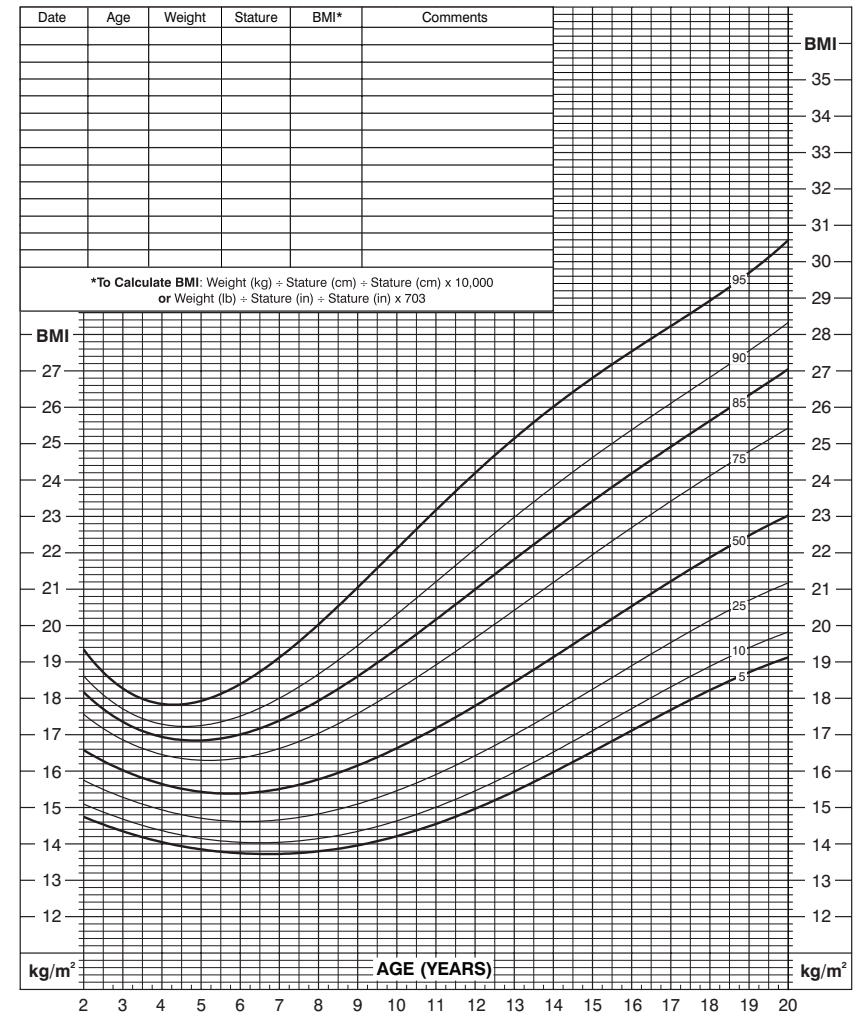


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2 to 20 years: Boys
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